

JOB TITLE (Number if applicable)	DATE: 11-9-94	NEW _____	JOB SAFETY AND HEALTH ANALYSIS
	PAGE 1 of 2	REVISED _____ JSHA NO. _____	
JOB TITLE OF PERSON WHO DOES JOB:	SUPERVISOR:	INSTRUCTIONS ON BACK	
PLANT/LOCATION:	DEPARTMENT:	COMPANY/ORGANIZATION: O + M And Son. <i>Bayonne, New Jersey</i>	
REQUIRED AND/OR PROPOSED PERSONAL PROTECTIVE EQUIPMENT:		ANALYSIS BY:	
		REVIEWED BY:	
		APPROVED BY:	
BREAKDOWN OF BASIC JOB STEPS	POTENTIAL HAZARDS	PROPOSED ACTIONS OR PROCEDURES	
Drum Scaffolding	Flying debris, Cuts	Face Shields, hard hats,	
	and lacerations, moving	Safety glasses,	
	parts, dust conditions,	When handling metals	
	heights (Platform off	USE Sample gloves with	
	or ground) high pressure	wizard gloves, loose clothing	
	hosing, burns, noise,	around moving parts, keep	
	chemical burns or	safe distance away from	
	exposure.	machinery (authorized & trained	
		person only) level "C"	
		Protection back-up with	
		respirator. Make Eye	
		Contact with Operator,	
		USE Hi-VISE vest, USE	
		one rung at a time when	
	climbing, Make sure chains		
	and Guard rail and Secure		
	3 Point Contact.		



(over)